Synopsis

GENDERED PERSPECTIVE ON RELATIONAL HEALTH PERCEIVED STRESS COPING AND ATHLETE SATISFACTION AMONG FEMALE COLLEGE ATHLETES IN KERALA

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INTRODUCTION

In terms of participation and equality, women have made tremendous strides in the past few decades. Today it is commonplace to see females participating in all levels of the workforce, the political arena, and athletics. However, while it is generally accepted in many cultures that women can partake in various facets of life that were once considered male oriented, there are still many stigmas that surround females that chose to do so. This is especially obvious in the area of sports.

Gender roles are social mores that influence the perceptions and behaviour of individuals on daily basis. They tell people how they are supposed to act, look, and even what one's interests should be. These roles are culturally dependent and are reinforced from birth (Ozkan & Lajunen, 2005; Williams & Best, 1990). For example, traditional Indian culture stresses that men are supposed to support the household financially and are not supposed to convey emotions. Women, on the other hand, are supposed to be emotional and fulfill the role of caretaker and mother. In modern society these traditional roles have become blurred but recently national survey supported these roles as the "ideal family situation".

Relational health is an important component of healthy psychological development in females and is constructed through mutual understanding, emotional

support, and the commitment of individuals to the growth of each individual within a collective unit (Gilligan, 1994; Jordan et al., 1991; Surrey, 1985). Women develop a sense of relational competence from establishing and maintaining these growth fostering relationships as evidenced by "movement t oward mutuality, developing anticipatory empathy, being open to being influenced, experiencing vulnerability as an inevitable place of potential growth rather than danger, creating good connections rather than exercising power over others as the path of growth" (Jordan, 1994, p. 3). Relational theorists (Gilligan, 1982; Jordan et al., 1991; Miller, 1986) contend that relationships within the community, with peers and with mentors in particular, are central to women's psychological growth and development. According to the theoretical tenets of the Relational Cultural Theory, it is likely that the quality of relationships with members of the athletic community, teammates and coaches have a profound impact on female college athletes' emotional and psychological wellness.

In coping there is a distinction to be made between different styles and strategies of coping. Lazarus and Folkman (1984) proposed the constructs of problem – focused and emotion- focused coping strategies. P roblem focused coping refers to efforts made to mitigate stress by reducing or eliminating the perceived threat and can be likened to Roth and Cohen's (1986) concept of approach coping (Anshel, 1996). Conversely, emotion focused coping refers to mechanisms employed to control the emotional response to the threat event if the threat itself is not altered (Lazarus & Folkman, 1984). To bring this into context, problem – focused coping includes strategies such as problem – solving, planning, tim e management or increasing effort while emotion – focused coping strategies include r elaxation, positive self – talk, wishful thinking and acceptance to mention a few (Nicholls, Holt, Polman, & James, 2005). According to Moos (1993), approach coping strategies are aimed at resolution

or management of life stressors, whereas avoidance coping strategies are aimed at avoiding thinking about stressors, or managing feelings about a stressor

A related factor called athlete satisfaction gained prominence in the understanding of group motivation. Chelladurai and Riemer (1997) refer to athlete satisfaction as an outcome resulting from the athlete evaluation of the makeup, procedures, and effects related to her/his experience. In other words, an athlete's level of satisfaction can be seen as a reflection of how well the athletic endeavour meets the athlete's own personal standards. Chelladurai et al. (1988) noted that an early study identified two facets of athlete satisfaction as satisfaction with personal outcomes and satisfaction with leadership outcomes.

Consequentially, athlete satisfaction can be understood as a positive affective state produced by a judgment of the structures, processes, and outcomes associated with the athletic experience, and it may be proved to be the ultimate measure for organizational effectiveness of an athletic experience (Chelladurai & Riemer, 1997).

STATEMENT OF THE PROBLEM

The purpose of this study was to expand on what researchers and practitioners know about college women’s relationships with their teammates and members of the athletic community and further examine the link between these relationships and self-reported satisfaction in sport. Another purpose of this study was to address the link between female college athletes’ relationships with members of the athletic community and perceived stress and coping style. The third purpose of this study was to examine the perceived stress and coping style (i.e., engagement and disengagement coping) as they relate to athlete satisfaction. The fourth purpose of this study was to examine the relational health as a potential mediator of the relationship between perceived stress and athlete satisfaction among female college athletes.

DELIMITATIONS

1. The study was delimited to female students studying in different colleges under the four Universities in Kerala state only.
2. The study was further delimited to Athletics, Volleyball and Basketball players participating in the Inter Collegiate competitions of four Universities in Kerala.
3. This study was delimited to selected questionnaires in assessing the Relational Health, Perceived Stress, Coping styles and Athletes Satisfaction among female college athletes.
4. The study was also delimited to 281 female college athletes who have participated in the Inter Collegiate competitions of four Universities in Kerala.

LIMITATIONS

1. Questionnaire research has its limitations, any bias that may enter into the subject on this account may be considered as a limitation of this study.
2. Life style of the subject is beyond the control of the researcher, which may be considered as another limitation of this study.
3. Socio-economic and religious factors which cannot be controlled by the scholar might have affected the responses of the students; these are considered as limitations of this study.

HYPOTHESIS

On the basis of the literature reviewed, research findings and the scholar's own understanding of the problem the following hypotheses were formulated.

1. There is no relationship between Athlete Satisfaction Questionnaire (ASQ) and Relational Health Indices (RHI) – Community (C) , Teammates (T).

2. There is no relationship between Relational Health Indices (RHI) – Community, Teammates and Perceived Stress Scale 10 – item (PSS-10)
3. There is no relationship between Coping Checklist for Sport (CCS) and Relational Health Indices – Community, Teammates.
4. There is no relationship between Athlete Satisfaction Questionnaire and Coping Checklist for Sport.
5. There is no relationship between Athlete Satisfaction Questionnaire and Perceived Stress Scale.
6. The relationship between perceived stress and athlete satisfaction is not mediated by relational health.
7. There would be no significant difference in the relational health between Groups (Athletics, Basketball and Volleyball) and Levels (State represented, University represented and Inter collegiate participation) among female college athletes in Kerala.
8. There would be no significant difference in perceived stress between Groups and Levels among female college athletes in Kerala.
9. There would be no significant difference in coping between Groups and Levels among female college athletes in Kerala.
10. There would be no significant difference in the athlete satisfaction between Groups and Levels among female college athletes in Kerala.

DEFINITIONS AND EXPLANATION OF TERMS

Athlete Satisfaction

Athlete satisfaction is a positive affective state resulting from a complex

evaluation of the structures, processes, and outcomes associated with the athletic experience (Chelladurai & Roamer, 1997, P.135). The level of an athlete's satisfaction is determined by the discrepancy between what is wanted by the athlete and the perception of what is received within the psychological, physical, and environmental domains.

Coping

Coping has been defined as constantly changing "co gnitive and behavioural efforts to manage specific external and/ or internal demands that are appraised as taxing or exceeding the resources of the person" (L azarus & Folkman, 1984, p.141).

Disengagement coping

Disengagement coping encompasses thoughts and behaviours that focus attention away from the stressful event and includes strategies such as ignoring the task, focusing negatively on self rather than on the task, self-criticism, and blame (Haney & Long, 1995; Tobin, Holroyd, Reynolds & Wigal, 1989).

Engagement coping

Engagement coping encompasses "active efforts to ma nage both problem-focused and emotion-focused aspects of the stressful event" (Haney & Long, 1995, p. 1727), characterized by attempts to manage the stressful person environment relationship (i.e., the source of stress). Emotion-focused behaviours are attempts to distract oneself from the stress provoking relationship (Lazarus, 1999; Lazarus & Folkman, 1984).

Stress

Stress will be defined according to a definition by Lazarus and Folkman (1984), as a condition or feeling experienced when a person perceives that "demands

exceed the personal and social resources the individual is able to mobilize." Lazarus developed psychological stress theory which views stress as a relationship, or transaction, between individuals and their environment. Self-reported perceived stress was measured by the Perceived Stress Scale.

Relational Health

Relational health refers to one's level of satisfaction with peer, community and mentor relationships (Liang et al., 2002).

SIGNIFICANCE OF THE STUDY

Sport Psychology Research indicates that men and women handle stress differently, and that women cope using strategies that may have less value to coaches and the athletic culture (Anshel et al., 2001; Crocker & Graham, 1995). However few, if any, Sport Psychology Studies examined the subjective experiences of female athletes using the theoretical framework of the Relational Cultural Theory (RCT). Specifically, the role of healthy, supportive relationships with teammates, coaches and the community and their potential to serve as mediator of the relationship between stress and athlete satisfaction for female student-athletes lacks attention in sport psychology literature despite the vast amount of research on the stress and coping process in athletic settings.

Female athletes revealed their frustrations resulting from their perception that the athletic culture does not understand their individual goals, needs, or the impact of stress and anxiety on their personal and athletic life (Bump, 1986). Therefore, it is important to examine how relationships are related to stress, emotion, and the coping process with the primary goal of enhancing psychological health for female college athletes. One method is to add a theoretical layer to the stress and coping framework and examine the stress and coping process in female athletes with a model of

psychological health. The RCT was recently developed to more accurately describe the psychological development and needs of women. Within this framework, researchers and practitioners may enhance their understanding of subcultures within the athletic community to facilitate a highly satisfactory and productive athletic experience for female college athletes. More specifically, understanding the relational needs of female athletes requires a more thorough exploration of how relationships are established, developed, nurtured and maintained with the hope of understanding how to facilitate female athletes' efforts to achieve a satisfying experience both personally and athletically.

Prior to a recent trend of sport psychology research and practice, researchers primarily utilized psychological models that lacked an emphasis on the unique experiences of women and issues related to diversity in the assessment and intervention of personal and performance deficits (Gill, 2001; Hall, 2001). Ideas about competition, motivational techniques, and methods of discipline were tested predominantly by male researchers with male participants (Tuffey, 1995) and based on a traditional model of psychological development. According to relational theorists, traditional models of psychological development do not fit women's experiences (Gilligan, 1982; Miller & Stiver, 1997). Gilligan (1982) and Jordan (2003) contend that the current theories provide a false reality for women through the limitations in the conception of the human condition and the bias in clinical-developmental theory (Gilligan, 1982; Jordan, 2002). According to Jordan (2003), developmental theories reflect an old tradition in which the differences between the dominant and non dominant subjects are viewed as deficient or defective in a hierarchical culture. In terms of athletics, by the time women became heavily involved in sports, previous models of coaching and relating to athletes were well established

and few questioned the generalizability of traditional psychological models of development when working with or studying female athletes (DeBoer, 1995; Fasting, 1994).

Selection of Subjects

The sample consists of 281 athletes. The athletes belong to different colleges of four Universities in the State of Kerala. All the athletes (N = 281) were females. The samples for this study were selected from the four universities in Kerala viz. Mahatma Gandhi University, Kottayam, Kerala University, Thiruvananthapuram, Calicut University, Thenjippalam and University of Kannur, Mangattuparambu. The subjects obtained first and second positions in inter collegiate holders games viz. Basketball, Volleyball and individual first, second and third position holders in Athletics. Athletes' age ranged from 17 to 23 years .

Tools for the study

Five instruments were used in this study, namely

1. Relational Health Indices (RHI; Liang, Tracy, Taylor, Williams, et al., 2002).
2. Perceived Stress Scale (PSS10; Cohen et al., 1983).
3. Coping Checklist for Sports (CCS; Haney 2004, Haney & Long, 1995).
4. Athlete Satisfaction Questionnaire (Riemer & Chelladurai, 1998).
5. Demographic Questionnaire.

Statistical Techniques Employed

Different descriptive statistics are computed to describe the nature of the data. These statistics will provide the various measures of the sample. Person's product moment correlation was used to find the preliminary relation between statistical variables. Regression analysis was used to explain variation in dependant variable

based on the variation in independent variables. The data pertaining to the relational health, perceived stress, coping, and athlete satisfaction were tested using the Two-Way ANOVA and LSD Post Hoc analysis. Testing of hypothesis level of significance was set at .05 level.

RESULT OF THE STUDY

The product moment correlation was performed to find preliminary relation between athlete satisfaction with Relational Health Indices variables - Community and Teammates. There is a significant correlation between athlete satisfaction and teammate were found r = 0.372 (significant at 0.01 level) and athlete satisfaction and community was r = 0.415. The results revealed a significant relationship in the direction as expected (i.e., as relational health increased, reports of athlete satisfaction increased). Therefore the null hypothesis was rejected. Regression analysis revealed that the model was significant, $F(2, 278) = 43.411$, $p < 000$. The R^2 for the model was 0.238 and adjusted R^2 was 0.233 which indicated that relational health accounted 23% of the variance in athlete satisfaction.

The product moment correlation was performed to find preliminary relation between relational health with perceived stress. Significant correlation (r = -0.372) was found between relational health and perceived stress (Significant at 0.01 level). A standard multiple regression analysis was performed with perceived stress as the independent variable and total relational health as the dependant variable. The results revealed that there was a significant relationship in the direction as expected (i.e., as perceived stress increased, reports of total relational health decreased). Therefore the null hypothesis was rejected. Regression analysis revealed that the model was significant, $F(1, 279) = 31.484$, $p < .000$ The R^2 for the model was 0.101 and adjusted

R^2 was 0.098 which indicated that perceived stress accounted,10% variance in relational health.

The product moment correlation was performed to find preliminary relation between coping style with relational health. There is no significant correlation (r = 0.016) found between coping style and relational health. A standard multiple regression analysis was performed with coping style as the dependant variable, and relational health as the independent variable. The overall model was not significant when coping style (engagement coping and disengagement coping) were analyzed in a standard multiple regression analysis. The results revealed no significant relationship in the direction as expected (i.e., as engagement coping increased, reports of relational health increased). The results indicated that relational health does not predict coping style.

The product moment correlation was performed to find preliminary relation between athlete satisfaction with coping style. There is no significant correlation (r = 0 .165) was found between athlete satisfaction and coping style. A standard multiple regression analysis was performed with athlete satisfaction as the dependent variable and coping style (engagement coping and disengagement coping) as the independent variable. The results revealed that engagement coping was found to be a predictor of athlete satisfaction and disengagement coping did not predict athlete satisfaction. However engagement coping was significant as an individual predictor. Therefore the null hypothesis was partially accepted. Regression analysis revealed

that the model was significant, F (2. 278) 79.571 p<.000. The R^2 for the model was 0.364 and adjusted R^2 was 0.359 which indicated that the coping style (Engagement coping) accounted 36% variance in athlete satisfaction.

The product moment correlation was performed to find preliminary relation between athlete satisfactions and perceived stress. There is a significant correlation (r = -0.313) found between relational health and perceived stress. (Significant at 0.01 level). A standard multiple regression analysis was performed with total athlete satisfaction as the dependent variable and perceived stress as the independent variable. The results revealed that there is a significant relationship and negative association between levels of perceived stress and athlete satisfaction. Specifically, the regression equation performed with perceived stress as the independent variable and athlete satisfaction as dependent variable revealed that as perceived stress as indicated by the PSS10 increased, self reported athlete satisfaction decreased, Therefore the null hypothesis was rejected. Regression analysis revealed that the

model was significant. F (1,279) = 30.312, P<.000. The R^2 for the model was 0.098 and adjusted R^2 was 0.095 which indicated the perceived stress accounted only 9% of the variance in athlete satisfaction.

A version of the Sobel Test, Aroian test and Goodman tests were also performed to determine whether relational health significantly mediated the relationship between perceived stress and athlete satisfaction. The results revealed that relational health significantly mediate the relationship between perceived stress and athlete satisfaction. The overall model was significant with F (2, 278) = 50.061,

p<.000. The R^2 for the model was 0.265 and adjusted R^2 was 0.269. The relationship between relational health and perceived stress and athlete satisfaction was significant.

CONCLUSION

Within the limitations of the present study and on the basis of findings, the following conclusions may be drawn.

1. Significant relationship between Relational Health Indices sub scale-Teammate and Athlete Satisfaction among the female college athletes in Kerala. As relational health increased the reports of athletes satisfaction increased.
2. Significant relationship was found between Relational Health Indices sub scale-Community and Athlete Satisfaction among the female college athletes in Kerala.
3. Significant relationship was found between total Relational Health and Perceived Stress among the female college athletes in Kerala. As Perceived Stress increased the total Relational Health decreased.
4. No significant relationship was found between Relational Health and Coping style (engagement coping and disengagement coping) among the female college athletes in Kerala. It means the relational health does not predict the coping style.
5. No significant relationship was found between Coping style and Athlete Satisfaction among the female college athletes in Kerala.
6. Engagement coping was found to be a predictor of Athlete Satisfaction among female college athletes in Kerala.
7. Disengagement coping does not predict the Athlete Satisfaction among female college athletes in Kerala.
8. Significant negative relationship was found between Athlete Satisfaction and Perceived Stress among female college athletes in Kerala.
9. Relational Health significantly mediates the relationship between Perceived Stress and Athlete Satisfaction among female college athletes in Kerala.

RECOMMENDATIONS

In the light of the conclusions drawn, the following recommendations are made.

1. An awareness programme shall be conducted for the athletic community to understand the importance of creating and maintaining growth - fostering relationships as a powerful influence as personal and athlete satisfaction as an indicator of perceived stress and athlete satisfaction.
2. Training should be given to the coaches and administrators to take the specific ways to create and nurture growth – fostering relat ionships which include active listening and engagement or attunement to the athlete's concerns,

questions or sharing daily experience of female athletes.

3. Coaches and administrators should also understand that relational issues are of primary concern for college students; female college athletes reported that the quality of their relationships with members of the athletic community, teammates and coach significantly imparted their athletic experience.
4. Administrators, Counselors, and sport practitioners communicate the potentiality of the beneficial effects of relational health on perceived stress and athlete satisfaction among female college athletes to all members of the athletic campus community.
5. Out reach services should be educational in nature to transcend the obstacles that inhibit the flow of information from a counselor to athletes, coaches and all members of the athletic community.

6. Effects must be made to educate, and provide psychological support to athletes who use potentially destructive coping strategies
7. Studies may also be conducted to examine the development of coping skills among adolescent athletes and the development of mental skills and mental toughness will provide an area of comparison.
8. Future research should also examine the relationship between athlete's episodic coping and long term out-comes of their coping behaviour.
9. Future research also required to find the effectiveness of the coping responses used or whether the coping responses were considered adaptive or meta adaptive. In this area is warranted as often coping is misinterpreted to mean that the athlete is responding appropriately to stress.
10. Future research is also needed to determine how and under what conditions avoidance coping can help athletes to overcome stress.
11. In order to assure generalizabilty and to expand understanding of the complexity of relational health and its impact on successful adjustment, it will be important to replicate these findings and to validate the RHI across gender, and other diverse populations (Ling et al, 2002)
12. Future research is also necessary to identify the ways in which peer, mentor, and community relationships can most effectively be fostered in college women.